KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	17-675-C	Version Type:	AMENDED
Report Date:	12/20/2017 9:30 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Houston Police Dept.	Agency Address:	1200 Travis, 16th Floor
Agency City:	Houston	Agency State:	TX
Agency Zip:	77002		

Director Information

Director Salutation:	Chief	Director First Name:	Art
Director Middle Name:			
Director Last Name:	Acevedo		
Reporter Name:	Kimberly Fowler	Reporter Email:	kimberly.fowler@houstonpolice.org

Decedent Information

Identity of Deceased

First Name: Jairo

Middle Name: Rafael

Last Name: Veras

Suffix:

Date of Birth: 7/20/1985 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 32

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or Incident: 7/22/2017 1:20 AM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 7/22/2017 1:26 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: Yes, results pending

What was the manner of death? (select only one)

Manner of Death: Pending autopsy results

Medical Cause of Death:

Medical Cause of Death:

N/A

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment:	No

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?:	Not applicable

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?:	Not Applicable

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?:	Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death:	Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address:	6406 Hillcroft	City:	Houston
County:	Harris	Zip:	77081

What location category best describes where the event causing the death occurred?

Location Category: Parking lot/garage

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Police Custody (pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

N/A

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Dead on arrival at medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?:	No

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

None

Offense 2:

None

Offense 3:

None

Were the Charges::	Not filed at time of death

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense:	Medical / Mental Health assistance call

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons:	No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?:	No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	No	Make suicidal statements?:	No
Exhibit any mental health problems?:	No	Exhibit any medical problems?:	No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	No	Resist being handcuffed or arrested?:	No
Physically attempt/assault officer(s):	No	Gain possession of officer's weapon:	Unknown
Verbally threaten other(s) including law:	No	Escape or attempt to escape/flee custody:	No
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On July 22, 2017, at approximately 0120 hours, patrol officers were dispatched to a CIT/Suicide call at 6469 Hillcroft in Houston, Harris County, Texas. When officers arrived on scene, they found the complainant, Jairo Veras, lying on the ground in medical detress, Mr. Veras was partially clothed and vomiting a dark colored substance. Base on Mr. Veras' erratic behavior, the officers believed that he was under the influence of an unknown narcotics substance and also in medical distress. One of the patrol officers requested an ambulance while the officers and a citizen attempted to hold Mr. down to keep him from injuring himself. Mr. Veras was thrashing his arms and head against the pavement. To prevent Mr. Varas from injuring himself, hand restraints were placed on him until paramedics arrived on scene. When the paramedics arrived, the patrol officers assisted them by handcuffing Mr. Veras to the stretcher. This was done to prevent Mr. Veras from injuring himself or the medical staff. One of the patrol officers rode in the ambulance while the other followed in their patrol car to the hospital. Upon arrival at the hospital, Mr. Veras' condition took a turn for the worst and he was pronounced dead upon arrival.